U.S. Department of Labor Office of Labor-Management Standards

FORM LM-10 EMPLOYER REPORT

Form approved Office of Management and Budget No. 1245-0003 Expires 07-31-2019

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

Part A

E OLMS V.								
1. File Number E- 67320	2. Fiscal Year Month/Day/Year Month/							
3. Name and address of Reporting Employer (inc. trade name, if any). Employer Barney's, Inc. Trade Name Barneys New York Attention To Grace Fu Title General Counsel Mailing Address P.O. Box, Bldg., Room No., if any Street 575 Fifth Avenue City New York State New York ZIP Code + 4 10017	4. Name and address of President or corresponding principal officer, if different from address in Item 3. Name P.O. Box, Building and Room Number, If any Street City State ZIP Code + 4							
5. Any other address where records necessary to verify this report will be available for examination. Name Title Organization P.O. Box, Building and Room Number, If any Street City State ZIP Code + 4	6. Indicate by checking the appropriate box or boxes where records necessary to verify this report will be available for examination. Address in Item 3 Address in Item 4 Address in Item 5							
7. Type of organization.	Mber (accife)							
	Other (specify)							
Signa								
Each of the undersigned, duly authorized officers of the above employer declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VIII on penalties in the instructions) Treasurer (if other title, see instructions) General Counsel On 01/9/2017 2017 212-450-8606 Telephone Number Telephone Number Telephone Number Telephone Number								

Name of Reporting Employer: Barney's, Inc.	File Number E		
Name of Reporting Employer, Barney's, Inc.	File Number E-	6 /	7320
8. Type of Reportable Activity Engaged In By Employer			
Read the following questions and the accompanying instructions carefully, taking into the instructions for these items, and check either "Yes" or "No" for each item. For each attach a Part B which appears on Page 3. Complete a separate Part B for each "Yes" Also, if the answer is "Yes" for more than one person or organization, complete a sep organization. If you answer "Yes", enter the number of Part Bs that are submitted for the second content of the second	h item that is ans " answer to any c parate Part B for	wered of Items each p	"Yes", you must s 8.a. through 8.f. person or
DURING THE FISCAL YEAR COVERED BY THIS REPORT:	YES	NO	If "Yes", number of Part Bs attached
8.a. Did you make or promise or agree to make, directly or indirectly, any payment or low money or other thing of value (including reimbursed expenses) to any labor organization any officer, agent, shop steward, or other representative or employee of any labor organization?	an of Signal Sig	NO ⊠	0
8.b. Did you make, directly or indirectly, any payment (including reimbursed expenses of your employees, or to any group or committee of your employees, for the purpose or causing them to persuade other employees to exercise or not to exercise, or as to the manner of exercising, the right to organize and bargain collectively through represent of their own choosing without previously or at the same time disclosing such payment such other employees?	of le statives	NO X	0
8.c. Did you make any expenditure where an object thereof, directly or indirectly, was to interfere with, restrain, or coerce employees in the right to organize and bargain colle through representatives of their own choosing?		NO X	0
8.d. Did you make any expenditure where an object thereof, directly or indirectly, was to information concerning the activities of employees or of a labor organization in conne with a labor dispute in which you were involved?		NO X	0
8.e. Did you make any agreement or arrangement with a labor relations consultant or ot independent contractor or organization pursuant to which such person undertook acti where an object thereof, directly or indirectly, was to persuade employees to exercise to exercise, or as to the manner of exercising, the right to organize and bargain colle through representatives of their own choosing; or did you make any payment (includi reimbursed expenses) pursuant to such an agreement or arrangement?	ivities 🖾 se or not ectively	NO	1
8.f. Did you make any agreement or arrangement with a labor relations consultant or ot independent contractor or organization pursuant to which such person undertook acti where an object thereof, directly or indirectly, was to furnish you with information cor activities of employees or of a labor organization in connection with a labor dispute if you were involved; or did you make any payment pursuant to such agreement or arrangement?	ivities LI ncerning	NO X	0
TOTAL NUMBER OF PART Bs F	FOR THIS REPOR	T IS	1

Name of Reporting Employer: Barney's, Inc.				File N	File Number E- 67320		
Check Item Number (from Page 2) to which this Part B applies	ITEM 8.a	ITEM 8.b	ITEM 8.c	ITEM 8.d	ITEM 8.e 🗵	ITEM 8.f	
9.a. Agreement X Payment Both			9.c. Position In labor organization or with employer (if an independent labor consultant, so state). Founder & CEO				
9.b. Name and address of person with whom or through whom a separate agreement was made or to whom payments were made.			9.d. Name and address of firm or labor organization with whom employed or affiliated.				
Name Peter List			Organization Kulture Consulting, LLC				
P.O. Box, Building and Room Number, if any Street P.O. Box 2877 City Pawley's Island State South Carolina ZIP Code + 4 29585			P.O. Box, Building and Room Number, if any Street P.O. Box 2877 City Pawley's Island State South Carolina ZIP Code + 4 29585				
10.a. Date of the promise, agreement, or arrangement pursuant to which payments or expenditures were agreed to or made. 10/5/2015		10.b. The promise, agreement, or arrangement was: X Oral					
11.a. Date of each payment or expenditure (mm/dd/yyyy).	11.b. Amount o or expend	f each payment liture	11.c. Kind of each payment or expenditure (Specify whether payment or loan, and whether in cash or property)				
10/30/2015 11/10/2015 11/13/2015 11/13/2015 11/19/2015		58,462 31,301 61,034 40,976 78,158	Cash Cash Cash Cash				
12. Explain fully the circumstances of all payments, including the terms of any oral agreement or understanding pursuant to which they were made. Kulture Consulting, LLC presented informational meetings to company employees relative to the process of unionization, the role of the NLRB, and/or collective bargaining with respect to the following locations of the reporting employer: Beverly Hills, CA; Chicago, IL, Las Vegas, NV; San Francisco, CA.							